

## Application Data Sheet

### Application Information

Application number::  
Filing Date:: 12/03/03  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification:: 430/311  
Suggested Group Art Unit:: 1752  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)::  
Number of copies of CRF::  
Title:: A VLSI-BASED SYSTEM FOR DURABLE HIGH-DENSITY INFORMATION STORAGE  
Attorney Docket Number:: 018236-000720US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 2  
Total Drawing Sheets:: 8  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::  
Secrecy Order in Parent Appl.?:: No

## Applicant Information

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: India  
Status:: Full Capacity  
Given Name:: Pawan  
Family Name:: Sinha  
City of Residence:: Cambridge  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of Mailing Address:: 100 Memorial Drive  
Postal Address Line Two:: Apt. 8-4C  
City of Mailing Address:: Cambridge  
State or Province of mailing address:: MA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 02142

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Pamela  
Middle Name:: R.  
Family Name:: Lipson  
City of Residence:: Cambridge  
State or Province of Residence:: MA  
Country of Residence:: US  
Street of Mailing Address:: 217 Thorndike Street  
Postal Address Line Two:: Apt. 109  
City of Mailing Address:: Cambridge  
State or Province of mailing address:: MA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 02141

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Keith  
Middle Name:: R.  
Family Name:: Kluender  
City of Residence:: Madison  
State or Province of Residence:: WI  
Country of Residence:: US  
Street of Mailing Address:: 5718 Tolman Ter.  
City of Mailing Address:: Madison  
State or Province of mailing address:: WI  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 53711

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Designation::	Representative Number::	Representative Name::
Primary	26,578	Lesley S. Craig
Associate	43,616	Thomas D. Franklin

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application 09/662,300	Continuation of An Appn claiming benefit under 35 USC 119(e) of	09/662,300 60/154,401	09/15/00 09/17/99

**Foreign Priority Information**

Country::

Application number::

Filing Date::

**Assignee Information**

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::